



**CCO Pandemic Unwinding  
Operational Q&A:**  
*Version 1, last updated 3/28/2023*

**Q1: Are CCOs permitted to send texts messages to members to remind them about redeterminations and to update their information?**

*Yes. The Federal Communications Commission has waived normal restrictions on texting and robocalling members related to the unwinding for government agencies, contractors, and managed care entities. For more information: <https://www.fcc.gov/document/fcc-provides-guidance-enable-critical-health-care-coverage-calls>*

**Q2: Can OHA share a schedule of when texting outreach might happen? We want to ensure if we send texts that we're not overlapping with OHA.**

*Members who have elected to receive texts will receive notifications that they've received a message they need to check in their ONE account. Members who have signed up for texts would receive messages accompanying the start of their renewal period, up to 2 reminder notices once per month during the response period, and one accompanying the reapproval or notice of closure, as well as some additional notifications when any intermediate steps are processed. These texts are a reminder to check their messages in the ONE system, so informative messages would not be redundant. The ONE system sends text message reminders for medical, food, and child care benefits; any messages from other programs are separate from this schedule.*

**Q3: If they can send texts, can CCOs provide a visible button on their landing page for members to click and direct them to the OHA website for taking action on their redetermination notice?**

*Yes. [Benefits.oregon.gov](http://Benefits.oregon.gov) has a link to the login page where members who have or can create a ONE account can take action on their renewal, and information on other ways to get help, such as through the call center, a community partner assister, or a local ODHS office.*

**Q4: We're curious if we would be permitted to send texts to members as proposed, and if so if we could include a link to a landing page on our site that would direct them to the OHA site. We would like the link in the text to go to a redetermination landing page on our website, which would provide redetermination information and a very visible button that members could click to go to the OHA website for taking action on their redetermination notice.**

*See response to Questions 1 and 3 above; this sounds like a workable plan.*

**Q5: How many members might roll off in each county?**

*We are not able to provide specific estimates at this time. We will evaluate what we are able to provide after the IT system changes for medical renewals are made on April 1st.*

**Q6: What is the external messaging around population sequencing? What can we tell people about when to expect a notification?**

*At this time, we are only able to tell members that they will be renewed sometime between April and January. We will evaluate what we are able to provide after the IT system changes for medical renewals are made on April 1st.*

**Q7: Do you know if there is a schedule that can be shared with the CCOs of all the redetermination communication activities? They would like one so they can balance their own messaging and amplification with our plans.**

*ODHS/OHA and its contractors are working on an executive summary to be shared as soon as we can.*

**Q8: We have heard MMIS access may be expanding--Who will have access to MMIS?**

*Provider organizations currently have access to MMIS (the Medicaid Management Information System, which is used to verify OHP benefit status). Any future access to MMIS for non-provider community partners will not be immediate and does not have a set date yet.*

**Q9: On behalf of providers, will reimbursement rates remain the same in the 90 days that members have to respond to the notice as well as during the 60 days they have before rolling off (if they don't qualify)?**

*So long as the member's coverage remains unchanged, the provider reimbursement rate should remain unaffected.*

**Q10: Can you confirm that the Basic Health Plan [sic], which we understand is different than Bridge, will not launch until 2024? We are hoping to confirm this understanding for budgeting purposes.**

*Yes, contingent on budget and approvals, the earliest possible launch of Basic Health Plan would be July 2024.*

**Q11: Does the reduction in FMAP impact OHA's plans for the redeterminations process, and if so, how?**

*No, OHA's redetermination plans will not be affected.*

**Q12: What is the overlap with the Healthier Oregon Program, if any?**

*Healthier Oregon members will generally have the same experience as other OHP members. There will be some people who have gone over the income or age limits and have retained benefits due to pandemic rules, who will follow the same unwinding process as other members.*

*Funding for any potential expansions and continuous eligibility for Healthier Oregon members has not been decided by the Oregon State Legislature yet.*

**Q13: Can we have a comprehensive list of all of the authorities that are changing as a result of the end of the federal COVID-19 PHE?**

*Yes, we have shared that list with CCOs previously and will update this document with a public link as soon as that is available.*

**Q14: Can we see some example renewal notices?**

*Yes, OHA will be able to share those in upcoming weeks in multiple languages. This Q&A will be updated with the link to them once available.*